

#3.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application, or
☒ Application No. 09/832,503, filed on APRIL 11, 2001,
☐ as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: THOMAS E. BENIM

Signature: Thomas E. Benim

Citizen of: US

Inventor two: SUSAN GOGOL CHAMBERLIN

Signature: Susan Gogol Chamberlin

Citizen of: US

Inventor three: JEFFREY ALLEN CHAMBERS

Signature: Jeffrey Allen Chambers

Citizen of: US

Inventor four: STEVEN R. COSENTINO

Signature: Steven R. Cosentino

Citizen of: US

☒ Additional inventors are being named on 1 additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FULL NAME OF INVENTOR(S)Inventor one: PETER R. HUNDERUPSignature: *Peter R. Hunderup* Citizen of: USInventor two: ROSS A. LEESignature: *Ross A. Lee* Citizen of: USInventor three: SUSAN D. PROCACCINISignature: *Susan D. Procaccini* Citizen of: US

Inventor four: _____

Signature: _____ Citizen of: _____

☐ Additional inventors are being named on _____ additional form(s) attached hereto.

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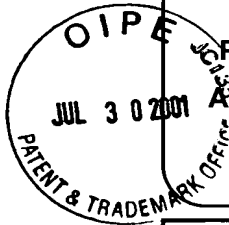
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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/832,503
Filing Date	APRIL 11, 2001
First Named Inventor	THOMAS E. BENIM, ET AL.
Title	INSULATING LABEL STOCK
Group Art Unit	1772
Examiner Name	UNASSIGNED
Attorney Docket Number	DP6945 US NA

I hereby appoint:

☒ Practitioners at Customer Number

23906



OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number

OR

☐ Practitioners at Customer Number

Place Bar Code Label Here

☐ Firm or
Individual Name

THOMAS E. BENIM

Address

2649 BROOKWOOD ROAD

Address

City

KINSTON

State

NC

ZIP

28504

Country

US

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

THOMAS E. BENIM

Signature

Thomas E. Benim

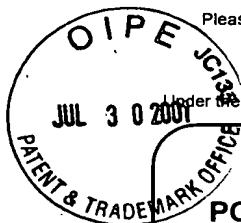
Date

June 22, 2001

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☒ *Total of 7 forms are submitted.

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OR

☐ Practitioners at Customer Number

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☐ Firm or
Individual Name

JEFFREY ALLEN CHAMBERS

Address

52 KING'S GRANT ROAD

Address

City

HOCKESSIN

State

DE

ZIP

19707

Country

US

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

JEFFREY ALLEN CHAMBERS

Signature

Date

July 19, 2001

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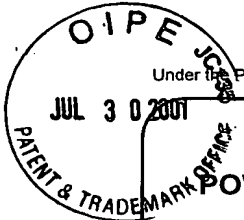
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Place Bar Code Label Here

☐ Firm or
Individual Name

SUSAN GOGOL CHAMBERLIN

Address 613 BRIGHTON ROAD

Address

City WILMINGTON

State

DE

ZIP

19809

Country US

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
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SIGNATURE of Applicant or Assignee of Record

Name SUSAN GOGOL CHAMBERLIN

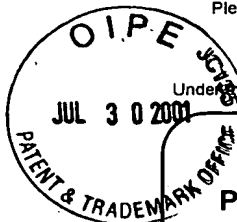
Signature *Susan Gogol Chamberlin*

Date *July 17, 2001*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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☐ Firm or
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STEVEN R. COSENTINO

Address

9030 THOMPSON ROAD

Address

City

QUINTON

State

VA

ZIP

23141

Country

US

Telephone

Fax

I am the:

☒ Applicant/Inventor.

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SIGNATURE of Applicant or Assignee of Record

Name

STEVEN R. COSENTINO

Signature

Steven Cosentino

Date

June 21, 2001

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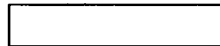
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PETER R. HUNDERUP

Address

10317 STONECREST RD.

Address

City

RICHMOND

State

VA

ZIP

23236

Country

US

Telephone

Fax

I am the:

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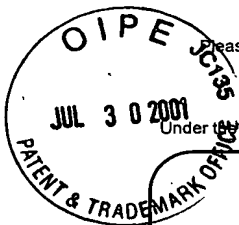
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ROSS A. LEE

Address 48 HILLVIEW AVENUE

Address

City CHESAPEAKE CITY State MD ZIP 21915

Country US

Telephone Fax

I am the:

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SIGNATURE of Applicant or Assignee of Record

Name ROSS A. LEE

Signature

Date

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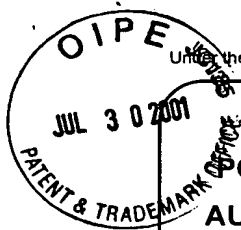
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OR

☐ Practitioners at Customer Number

OR

Place Bar Code Label Here

<input type="checkbox"/> Firm or Individual Name	SUSAN D. PROCACCINI				
Address	615 OLD WILMINGTON ROAD				
Address					
City	HOCKESSIN	State	DE	ZIP	19707
Country	US				
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

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SIGNATURE of Applicant or Assignee of Record

Name	SUSAN D. PROCACCINI
Signature	<i>Susan D Procaccini</i>
Date	7/18/01

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Washington, D.C. 20231

on July 24, 2001

Date


Signature

PATRICIA A. TURNER

Type or printed name of person signing Certificate

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DP6945 US NA
Response to Notice to File Missing Parts
Part B of Notice to File Missing Parts
Fee Transmittal Sheet
Executed Declaration (1)
Executed Powers of Attorney (7)
Postcard